To all present, Greetings:

I represent the Kosciusko County Drug Task Force located out of Warsaw, Indiana. Our Task Force is a small unit with five full time investigators assigned to investigate drug related activities. We have three members from the Kosciusko County Sheriff's Office and two members from the Warsaw Police Department. Our unit operates on a small federal grant supplemented by a cash match and some support from the Sheriff and the Chief of Police. Our primary area of responsibility is within the boundaries of Kosciusko County but travel to surrounding areas to assist other agencies. Kosciusko County has an average population of 76,000 people but that figure doubles in the summer months due to the large amount of lakes in the area. Our area also has thirteen towns or cities that are served by our unit. Within Kosciusko County we have three bulk facilities that handle anhydrous ammonia, a key ingredient in the manufacturing of methamphetamine.

Our task force began in 1988 with officers volunteering their time after shift work and became full time in 1989. Since the inception of the task force the amount of drugs sold has continued to sky rocket even with the aggressive actions of our unit. Although it was heard of in the early 1990's we did not see methamphetamine. However in the last five years we have seen a drastic rise in the sales of meth and the manufacturing of meth in illegal drug labs. In the year 2001 we began finding active drug labs in our county and dealt with ten labs that year. All of them used to manufacture methamphetamine. In the year 2002 we dealt with five labs that were in the process of manufacturing the meth. We dealt with at least that many where we would find precursors but not an active lab. In 2003 we dealt with eleven labs that were active and more than thirty where we just found the precursors. We have also dealt with mobile labs in vehicles and are finding more labs in remote wooded areas instead of homes like it started out. All of the labs we have dealt with are making their meth with anhydrous ammonia; we have not yet discovered or seen any Red Phosphorus labs in our area.

Besides the problem with locals manufacturing meth in our area we have a large Hispanic population and they are importing high grade meth and selling in our community. In 2002 we have developed a good working relationship the Bureau of Immigration and Customs Enforcement (B.I.C.E.) out of San Antonio, Texas. The majority of the meth we are seeing is coming from Mexico and the relationship we have in Texas has helped us to better combat the flow of the meth coming in to Kosciusko County. We have also seen an increase in the amount of marijuana coming to our area out of Mexico. With information shared and the assistance of BICE agents out of Texas we were successful in arresting several illegal aliens and seizing large amounts of drugs, including imported meth. A

large portion of our Hispanic population are illegal and play a large part in our drug trafficking. We have determined that a lot of the illegal aliens we deal with are part of a larger ring that works out of Mexico to Chicago, Illinois, Warsaw, Indiana and Pasco, Washington.

With the increase in our Hispanic population as I have stated we have seen an increase in the importation of methamphetamine. In the year 2002 we either made undercover purchases or seized a total of four ounces of meth and in the year 2003 that increased to four pounds, two ounces (approximately Two Kilos). Also in 2002 we either made undercover purchases or seized seventy-six pounds of marijuana and in 2003 that increased to two hundred twenty-three pounds. The majority of both have been imported from Mexico. We experienced an increase in our case load, in 2002 we made 100 cases netting 66 incarcerated arrests and warrants issued for 19 others. In 2003 we made 107 incarcerated arrests and have warrants issued for 40 others.

Although we have a lot of resources available to our unit one of our biggest issues is the lack of funding to pool those resources together. We operate as I stated on a small federal grant that does provide with operating monies, however that falls short every year. The grant only provides us with fifteen hundred dollars per year for training. It is virtually impossible to update training and to provide quality training on methamphetamine or clandestine drug labs for five officers with that amount of funding. Even with the limited amount of dollars we operate on each year we continue to see an increase in our case load and expenses associated with making those cases. Thus far this year we have made seven cases involving methamphetamine and another case involving a meth lab. In 2003 we averaged 15.8 cases per month and as of January 29, 2004 we have made 16 cases for the month. This is setting the trend for this year to be as busy a last year if not busier. In 2003 we made forty-six cases involving meth and as stated so far this year we are at seven. In 2003 that averaged out to 3.8 cases per month involving meth and in the first month of 2004 that has already doubled.

With increase in the distribution of methamphetamine and the continued increase in the illegal drug labs, training for officers is a needed priority. The lack of funding for small agencies and drug units prevent the officers from receiving the adequate training they need. There have been federal monies provided to the State Police for them to use to combat and deal with meth related cases. I do believe the State Police needs the money as they have the clandestine lab teams and provide needed laboratory services for testing of drugs. However it is the local drug units that are making the majority of the cases in the field. Currently when we send drugs to the Indiana State Police Laboratory for testing it is taking an average of four to five months to get results back. With that type of delay we have to wait to obtain arrests warrants and or search warrants to serve on the dealers.

I spoke earlier of the bulk type facilities of anhydrous ammonia dealers in our area. We have documented a large increase in the theft of anhydrous from these facilities. Our arrests of these persons have increased two fold and we are currently using surveillance cameras to try to catch the thieves. With illegal drugs labs on the increase this does directly increase the theft of anhydrous. A propane supplier has regulations that require a fence be put around the bulk tanks at their location. An anhydrous supplier has no regulations of that sort. I realize that the explosion hazard associate with propane is far greater than that of anhydrous but the health hazards are greater with anhydrous. Anhydrous ammonia is one of the most dangerous chemicals used in the farming industry, but when used properly is safe for a farmer to use. However the persons that are stealing the anhydrous for the manufacturing of methamphetamine are not properly trained to handle this type of chemical and are creating a substantial risk to persons that live and work near the facilities.

One of our anhydrous bulk facilities sits inside the Town of Burket surrounded by residential neighborhoods and businesses. On November 21, 2003 we arrested two males that were in the process of stealing anhydrous from this particular facility. Representatives of the company were contacted and reported to us that the men could not be familiar at all with anhydrous. Company representatives told us that the men were three threads away from removing a plug on a 1 ½" main line. The main line is the main fill line on a 45,000 gallon anhydrous tank. Company representatives stated that the tank was 85% full and had the men succeeded in removing the plug it would have resulted in the death of numerous persons in Burket, Indiana. When these men were caught in the act by our agents it was in the middle of the night when the residents of Burket were asleep and with the rapid escape of the anhydrous in to the air evacuation would have been impossible. Stricter regulations on these facilities may not prevent all thefts but would I believe make an impact on thefts from these locations. Regulations on the bulk facilities would not regulate farmers on the storage of their nurse tanks in fields. Fencing of bulk facilities would more then likely increase thefts from farmer nurse tanks in the fields however the hazards and death risks would be diminished.

I have spoken with agents from other small drug units in northern Indiana and all feel the same way. Their meth cases and drug lab cases have drastically increased and they also lack the funds for proper training to deal with this situation. Most of them operate under a federal grant as we do and the monies supplied by the grants barely cover the day to day operation let alone the training issues and monies to make purchases of illegal drugs.

The health and safety hazards associated with illegal drug labs for first responding officers (drug unit agents) are very high. The risks associated with injury or death to these officers is greatly increased when it comes to responding to illegal drug labs that manufacture methamphetamine. Currently under Indiana law if a fireman battling an arson fire gets injured and requires medical attention it enhances the crime to a Class "A" Felony. Under the current laws there is no enhancement sentence for any emergency personnel who get injured as a result of responding to an illegal methamphetamine drug lab. Current law also provides that it is a Class "D" Felony to operate an illegal drug lab unless finished product is located in the lab. The only enhancement is if finished product

is found it increases the illegal drug lab to a Class "B" Felony. Again there is no enhancement for injury or death to officers in these cases. Anhydrous as you know is only one of the ingredients used to manufacture methamphetamine in these illegal labs. A large portion of the chemicals used besides the anhydrous present a substantial risk of fire and explosion again increasing the risks of injury and death to officers. Incarceration penalties are something else that is lacking when dealing with persons who manufacture methamphetamine, a Class "D" Felony is the lowest class of felony crimes in Indiana. We have been working with retailers in our area by educating them on the precursors used in the manufacturing of meth in illegal labs. As a direct result retailer's have been trying to limit the amounts of certain type of precursors one person may by at a time. This only works if the retailer has some way to determine that a person has previously purchased these types of precursors. Even with their policy this does not stop a person or persons from making several trips to the retail stores or going in with several friends and making large purchases collectively.

Kosciusko County is also a well known for its wild marijuana that grows throughout the most northerly part of our county and also in the most southern area. Eradication efforts have been in place for a number of years but do not completely take care of the problem. In years past it was possible for persons to purchase maps in neighboring States to our area to pick their own marijuana. A combined effort by law enforcement agencies has as stated made a dent in this particular situation but again it has not stopped marijuana pickers from coming to Kosciusko County.

Another issue we have seen rise rapidly lately is the sale and abuse of prescription drugs. Although we have always had dealers sell prescription drugs we are now seeing and buying a lot of Oxycotin Pills. Oxycotin is a prescription only highly addictive pain killer. These pills have also had a direct impact on the number of drug related deaths in our county. In the year 2002 Kosciusko County had three drug related deaths. In 2003 we had thirteen drug related deaths. Of those thirteen, ten were directly related to prescription drugs, mostly Oxycotin and the other three were cocaine related. The increase in drug related deaths in Kosciusko County rose four-hundred percent between 2002 and 2003.

Kosciusko County currently does not have any type of inpatient treatment centers or centers that offer treatments for persons addicted to methamphetamine. As a drug unit we do not work with treatment facilities for the rehabilitation of drug dependant persons. We only deal with the interdiction and enforcement end of the problem. As with drug units throughout Indiana we are doing our part to stop the flow by targeting the dealers. Treatment facilities would slow done the flow if they rehabilitated the users slowing down the demand. As with most drug units we have a strong working relationship with our prosecutor and work well within the judicial system in our county. With the lack of treatment available our only options are what we are trained to do and that is to enforce and incarcerate drug dealers. We do not generally target abusers of drugs but do intervene with enforcement action when needed.

I would like to thank the members of this committee for allowing me the honor of submitting this report and the honor of testifying before the committee. If further information is needed of me or my unit I can be reached at 574-372-2494 or by email at tciriello@kcgov.com.

Respectfully submitted,

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